

AMENDMENT TRANSMITTAL LETTER			Docket No. 21547-00295-US1	
Application No. 10/500,030-Conf. #2267	Filing Date June 24, 2004	Examiner N. T. Mai	Art Unit 1742	

Applicant(s): Carina Berggren et al.

Invention: ARRANGEMENT, DEVICE, METHOD PRODUCT AND USE IN CONNECTION WITH A
BLANK MADE PREFERABLY OF TITANIUM POWDER AND INTENDED FOR A DENTAL
CROWN OR OTHER PRODUCT FOR THE HUMAN BODY

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.
The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	31	- 20 =	11	x 50.00	550.00
Independent Claims	5	- 5 =	0	x 200.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					550.00

☒ Large Entity
 ☐ Small Entity

☐ No additional fee is required for this amendment.

☒ Please charge Deposit Account No. 22-0185 in the amount of \$ 550.00 .
 A duplicate copy of this sheet is enclosed.

☐ A check in the amount of \$ _____ to cover the filing fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge and credit Deposit Account No. 22-0185
 as described below. A duplicate copy of this sheet is enclosed.

☒ Credit any overpayment.

☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

/Burton A. Amernick/

 Burton A. Amernick
 Attorney/Agent Reg. No.: 22,852

CONNOLLY BOVE LODGE & HUTZ LLP
 1875 Eye Street, NW
 Suite 1100
 Washington, DC 20006
 (202) 331-7111

Dated: September 11, 2007

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: September 11, 2007 Electronic Signature for Burton A. Amernick: / Burton A. Amernick /

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2007</h3>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/500,030-Conf. #2267
		Filing Date	June 24, 2004
		First Named Inventor	Carina Berggren
		Examiner Name	N. T. Mai
		Art Unit	1742
TOTAL AMOUNT OF PAYMENT		(\$) 550.00	Attorney Docket No. 21547-00295-US1

METHOD OF PAYMENT (check all that apply)

☐ Check
 ☐ Credit Card
 ☐ Money Order
 ☐ None
 ☐ Other (please identify): _____

☒ Deposit Account
 Deposit Account Number: 22-0185
 Deposit Account Name: Connolly Bove Lodge & Hutz LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below
 ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17
 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
31	- 20 = 11	x 50.00 =	550.00	
HP = highest number of total claims paid for, if greater than 20.				

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
5	- 5 = 0	x 200.00 =	0.00

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 =	/50 =	(round up to a whole number) x	=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

SUBMITTED BY

Signature	/ Burton A. Amernick /	Registration No. (Attorney/Agent)	22,852	Telephone	(202) 331-7111	
Name (Print/Type)	Burton A. Amernick	Date	September 11, 2007			

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: September 11, 2007

Electronic Signature for Burton A. Amernick: / Burton A. Amernick /